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Bib Data Sheet

CONFIRMATION NO. 8560

SERIAL NUMBER 10/045,595	FILING DATE 10/23/2001	CLASS 514	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 208.1005US
RULE				

## APPLICANTS

Lino Tavares, Kinnelon, NJ;

Ihor Shevchuk, Yonkers, NY;  
 Mark Alfonso, Easton, CT; Geraldine Marcenyac, Norwalk, CT;  
 Kirti H. Valia, Plainsboro, NJ;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/242,514 10/23/2000

OK.

*AS*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None**AS*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/05/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	DRAWING	CLAIMS	CLAIMS	
Verified and Acknowledged	<i>AS</i> <i>AS</i> Examiner's Signature Initials	NJ	16	45	5

## ADDRESS

23280  
 DAVIDSON, DAVIDSON & KAPPEL, LLC  
 485 SEVENTH AVENUE, 14TH FLOOR  
 NEW YORK , NY  
 10018

## TITLE

Felodipine transdermal device and methods

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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